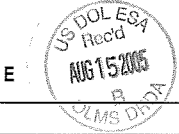


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>6161</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Terry</u> <u>Lynch</u> P.O. Box, Bldg., Room No., if any Street <u>8717 Baring Avenue</u> City <u>Munster</u> State <u>INDIANA</u> ZIP Code + 4 <u>46321-2705</u>	4. Name, file number, and address of labor organization. Name <u>Asbestos Workers AFL-CIO</u> Labor Organization File Number <u>000-090</u> P.O. Box, Building and Room Number, if any Street <u>9602 Martin Luther KING Jr Hwy</u> City <u>Lanham</u> State <u>Maryland</u> ZIP Code + 4 <u>20706-1839</u>
5. Position in labor organization. <u>International Vice President</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Terry Lynch

On

8-13-05

Date

708 203 1553

Telephone Number

Name of Person Filing

Terry Lynch

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Asbestos Workers UnionTrade Name, if any: P.O. Box, Bldg., Room No., if any Street 9602 Martin Luther King Jr HwyCity LanhamState Maryland ZIP Code + 4 20706-1839

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Blue Cross Blue ShieldTrade Name, if any: P.O. Box, Bldg., Room No., if any Street 300 E Randolph StreetCity ChicagoState Illinois ZIP Code + 4 60601-5099

11.a. Nature of such dealing.

Labor Provider For Health Care Seminar

11.b. Approximate dollar value of such dealing.

0

12.a. Nature of interest held or income received.

Seminar
Lunch
Dinner
Golf

12.b. Amount.

285.42

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing Terry Lynch	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name **Asbestos Workers Union**

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any _____

Street **9602 Martin Luther King Jr Hwy**

City **Lanham**

State **Maryland** ZIP Code + 4 **20706-1839**

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name **Killian Asset Management**

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any _____

Street **1250 W. Northwest Hwy Suite 600**

City **Palatine**

State **Illinois** ZIP Code + 4 **60067**

11.a. Nature of such dealing.

Box of Cookies at Christmas

11.b. Approximate dollar value of such dealing. **0**

12.a. Nature of interest held or income received.

12.b. Amount. **\$ 30.00**

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name _____

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any _____

Street _____

City _____

State _____ ZIP Code + 4 _____

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing <u>Terry Lynch</u>	File Number <u>U-</u>
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>Asbestos Workers Union</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street <u>9602 Martin Luther King Jr Hwy</u></p> <p>City <u>Lanham</u></p> <p>State <u>Maryland</u> ZIP Code + 4 <u>20706-1839</u></p>	<p>9. Business deals with: <u>Labor Provider</u> <u>Actuaries and Consultants</u></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u>Milliman USA</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street <u>55 W. Monroe</u></p> <p>City <u>Chicago</u></p> <p>State <u>Illinois</u> ZIP Code + 4 <u>60603</u></p>	<p>11.a. Nature of such dealing.</p> <p>Lunch \$30.10 <u>NONE</u></p> <p>11.b. Approximate dollar value of such dealing. <u>0</u></p> <p>12.a. Nature of interest held or income received.</p> <p><u>Lunch \$30.10</u> <u>Golf 122.82</u></p> <p>12.b. Amount. <u>152.92</u></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>14.a. Nature of payment.</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Name of Person Filing <u>Terry Lynch</u>	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>Asbestos Workers Union</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>9602 Martin Luther King Jr Hwy</u></p> <p>City <u>Lanham</u></p> <p>State <u>Maryland</u> ZIP Code + 4 <u>20706-1839</u></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input checked="" type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u>Insulco</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>2210 OAK LEAF STREET</u></p> <p>City <u>Joliet</u></p> <p>State <u>Illinois</u> ZIP Code + 4 <u>60436</u></p>	<p>11.a. Nature of such dealing.</p> <p><u>Local 17 JAC Meeting</u></p> <p>11.b. Approximate dollar value of such dealing. <u>0</u></p> <p>12.a. Nature of interest held or income received.</p> <p><u>Lunch and Golf</u></p> <p>12.b. Amount. <u>\$100.00</u></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>14.a. Nature of payment.</p> <p><u></u></p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p> <p><u></u></p>